

**MICHIGAN STATE POLICE
CRIMINAL JUSTICE INFORMATION CENTER
SECURITY & ACCESS SECTION
AUDITING UNIT**

**NONCRIMINAL JUSTICE AGENCY (NCJA)
PRE-COMPLIANCE AUDIT QUESTIONNAIRE**

Directions:

1. Answer the following questions to the best of your abilities.
2. If a question does not apply write "N/A" to signify *not applicable*.
3. In instances where your agency is required to attach or provide additional documentation please do so according to preferred method of return.
4. Upon completion of pre-compliance audit questionnaire, return to the Security & Access Section (SAS).

Send Completed Hard-Copy Form to:

Michigan State Police-CJIC

Attention: SAS

P.O. Box 30634

Lansing, Michigan 48909

OR Fax: (517) 241-0865

OR E-mail: MSP-CJIC-ATS@michigan.gov

*NCJA will be referenced as "agency" throughout the remainder of this document.

PRE-COMPLIANCE AUDIT QUESTIONNAIRE

Agency Name:

Agency Postal Address:

Who is responsible for the administrative oversight/management of the agency? (e.g. superintendent, principal, president)

Name:

Title:

Best method of contact:

E-mail:

Work Phone:

Who is responsible for the daily processing of criminal history record information (CHRI) received by the agency?

Name:

Title:

Best method of contact:

E-mail:

Work Phone:

NCJA REVIEW

1. In instances where the agency has requested an individual to complete a fingerprint based CHRI background check for employment or to volunteer; is documentation retained that indicates the position applied for or volunteered for? (i.e. application, new hire check list, volunteer form) Yes: ☐ No: ☐

Explain the agency's documentation process:

2. Indicate which of the following fingerprint reason codes the agency uses and a short description for its purpose (job/volunteer position and/or job/volunteer tasks) for each.
 - a) ☐ School Employment (SE):

b) ☐ National Child Protection Act – Volunteer (CPV):

c) ☐ National Child Protection Act – Employment (CPE):

3. Does the agency obtain individual's written consent upon requesting of a fingerprint based CHRI background check of the individual? Yes: ☐ No: ☐ If yes, please **attach** sample consent form.

Explain the agency's consent process:

4. In instances where an individual is requested to complete a fingerprint based CHRI background check, is the CHRI response received and retained by the agency?

Yes: ☐ No: ☐

Explain the agency's CHRI process:

5. Does the agency participate in additional programs that require the agency to fingerprint applicants for the program? (e.g. camps, MiWorks, AmeriCorps)

Yes: ☐ No: ☐

Program Name(s) and brief description:

6. Does the agency hold an agreement (not Livescan agreement) with the Michigan State Police (MSP) granting access for the exchange of CJI/CHRI (RI-087-Agency User Agreement for Release of Criminal History Record Information)? Yes: ☐ No: ☐ If yes, please **attach**.
7. Does the agency have an established agreement or is the agency in collaboration with a contractor (e.g. PESG, PCMI, EduStaff, CoachEZ, Chartwells) for the staffing of certain school positions? (e.g. substitutes, custodial, food services, coaches) Yes: ☐ No: ☐

Contractor Name(s) and brief description of staffing service provided:

8. Does the agency have a local agency security officer (LASO)? (An individual, within the agency, that ensures appropriate security measures are in place for CHRI) Yes: ☐ No: ☐

If yes, provide contact information.

Name:

E-mail:

Work Phone:

9. Does the agency have an established policy, procedure, written process, or any kind of written documentation that outlines the minimum screening requirements for personnel requiring **access to the CHRI**? Yes: ☐ No: ☐ If yes, please **attach**.

Explain current screening requirements:

10. If written documentation exists for personnel screening does it also include screening requirements for contractors and vendors (i.e. network or other application builder)?

Yes: ☐ No: ☐

11. Does the agency have an established policy, procedure, written process, or any kind of written documentation regarding ending a terminated employee's CHRI access?

Yes: ☐ No: ☐ If yes, please **attach**.

Explain the CHRI access termination process.

12. Does the agency have an established policy, procedure, written process, or any kind of written documentation regarding employee's CHRI access when reassignment or transfer of agency personnel occurs? Yes: ☐ No: ☐ If yes, please **attach**.

Explain the CHRI access process for individuals that are reassigned or transferred.

13. Does the agency have written documentation of sanctions for personnel failing to comply with agency established policies, procedures, and written processes? Yes: ☐ No: ☐ If yes, please **attach**.

14. For any electronic CHRI media (includes e-mail), does the agency use password protection?

Yes: ☐ No: ☐ *Explain* the agency's password attributes:

15. Please indicate **ALL** methods that CHRI responses are maintained by your agency.

Electronic (shared drive) ☐ E-Mail ☐ Hard Copy Filing ☐

16. Does the agency have a policy and procedures in place that addresses appropriate security controls for the handling, storage, transporting, and destruction of CHRI by an employee of the agency? Yes: ☐ No: ☐ If yes, please **attach**.

17. Does the agency allow employees to utilize personal or work issued devices (i.e. I-pad, cellular phones, laptops) to access CHRI from home or other areas outside of the office?

18. Explain the agency's "step by step" process for CHRI from the time it's received by the agency to storage in each instance:

a) *Explain* the agency's physical media process for CHRI.

b) Describe the physical CHRI *location* within the agency. Also, include any additional physical storage areas (i.e. use of off -site storage facilities, more than one area of storage).

c) *Explain* the agency's electronic media process for CHRI.

d) *Explain* the agency's process for the destruction of physical CHRI media.

e) *Explain* the agency's process for the destruction of electronic CHRI media.

f) Does the agency have an established policy, procedure, written process, or any kind of written documentation regarding the agency's transporting of CHRI, whether physical or on electronic devices, to places or areas outside of the original place of storage?

Yes: ☐ No: ☐

If yes, *explain* the agency's transport process:

19. Does the agency share CHRI responses with other agencies or the applicant?

Yes: ☐ No: ☐ If yes, indicate all that apply.

Other schools (public or private): ☐ Contractor: ☐ College/University: ☐ Applicant: ☐

20. In instances where CHRI is shared, is a signed release by the applicant completed?

Yes: ☐ No: ☐ Please **attach** release form sample.

Explain the agency's process for signed release:

21. Does the agency have a method of tracking CHRI shared with other agencies or applicant?

Yes: ☐ No: ☐ If yes, *explain* the agency's tracking method:

22. When receiving a shared CHRI response for the purpose of employment, is an ICHAT background check completed? Yes: ☐ No: ☐

23. Explain the agency's process for the retention of CHRI. (i.e. retention schedule)

24. Does the agency have a security breach policy or procedure regarding system (computer) security incidents? Yes: ☐ No: ☐ If yes, please **attach**.

25. Does the agency conduct security awareness training (SAT) for employees having access to CJI/CHRI (not NCJA Compliance Audit Training)? Yes: ☐ No: ☐